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FEC MAIL CENTER **ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. riends of Pete Gallego ADDRESS (number and street) (Check if address is changed) San Antonio CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) ikoob@capcompliance.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) www.petegallego.com (Check if address is changed) 09" '02" '2011" 2. DATE C FEC IDENTIFICATION NUMBER IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Christopher Koob Type or Print Name of Treasurer Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 02/2009) Toll Free 800-424-9530

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